

Hmx-1

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DISTRICT DEPARTMENT OF ENVIRONMENT  
UNDERGROUND STORAGE TANK PROGRAM

FAX COVER SHEET

DATE: 5/9/87 TIME: 2:57  
2:58 PM

TO: Jana Szaro

OFFICE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FAX NUMBER: 215 ~~(215)~~ 285-84-3163 OFFICE NUMBER: ( )

FROM: SHARON K. HAMILTON

OFFICE: DISTRICT DEPARTMENT OF ENVIRONMENT

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NUMBER OF PAGES, INCLUDING COVER SHEET: 19

EXPLANATION: Notification form for 8-000570

Th 1 2 3 4 5 6 7 8 9  
Hydrant Fuel Rem

Facility ID: 8000570 Facility Name: NAVAL ANACOSTIA - BLDG A398

**I. Ownership of Tank(s)**

Owner ID: 01458

Alt. ID:

Name: U.S. NAVY

Street: NDW ENVIRONMENTAL  
1014 N STREET SE SUITE 320

City: Washington County: District of Colum

State: DC

ZIP: 20374

Phone: (202) 433-7181

Fax:

Contact: (if other than Owner)

Taxpayer ID:

S.S. No:

Comments:

JOHN NESS  
301-227-0141

DO NOT CHANGE OWNER  
INFORMATION ON THIS FILE

**Type of Notification**

New: ☐ Amended: ☒ Closure: ☐

Date Received: 27 Feb 1998

Facility Operator:

Last

First

Facility ID: 8000570

Alt. ID: 8-000570

**II. Location of Tank(s)**

Name: NAVAL ANACOSTIA - BLDG A398

Street: SOUTH CAPITOL ST SW

City: Washington County: District of Colum

State: DC

ZIP: 20374

Latitude: +39° 00' 00.00"

Longitude: 077° 00' 00.00"

Phone: (202) 433-7181

Comments:

WARD 8

**III. Type of Owner**

Federal Government

**IV. Indian Lands**

Indian Lands: ☐ Tanks are located on land within an Indian Reservation or on other trust lands.

Tribe Owned: ☐ Tanks are owned by native American nation or tribe.

Tribe:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTA - BLDG A398

**V. Type of Facility**

Describe the kind of facility:

Federal Military

Comments:

**VI. Contact Persons In Charge of Tanks**

Name: FREESE, ELIZABETH

Address: HQ, NDW 901 M ST SE, Washington, DC 20374

Phone: (202) 433-7181

Fax:

Contact Type:

☐ Owner

☐ Operator

☐ CA Contact

☐ Manager

☐ Outreach

☐ Location Contact

☐ RP

☒ Fee Contact

☒ Other

DEPT HEAD OF ENVIRON

Name: SESLER, LEE

Address: HQ NDW CODE N2

Phone: (202) 433-0415

Fax:

Contact Type:

☐ Owner

☐ Operator

☐ CA Contact

☐ Manager

☐ Outreach

☐ Location Contact

☐ RP

☐ Fee Contact

☒ Other

ENVIORNMENTAL ENGINEER

**VII. Financial Responsibility**

Facility meets financial responsibility requirements: ☒

Check all that apply:

Self-Insured: ☒

Letter of Credit: ☐

Comments:

Insurance: ☐

State Fund: ☐

Risk Retention Group: ☐

Trust Fund: ☐

Guarantee: ☐

Other: ☐

Surety Bond: ☐

Not Listed: ☐

**VIII. Certification**

Name: ELIZABETH M FREESE

Title: HEAD, ENVIR SAFETY D

Date: 23 Feb 1998

Facility ID: 8000570

Facility Name: NAVAL ANACOSTA - BLDG A398

Latitude: 39° 0' 0" Longitude: 77° 0' 0"

**IX: Description of Underground Storage Tanks**

**1. Status of Tank**

Federally Regulated	<input type="checkbox"/>	Compartmented	<input type="checkbox"/>	AST	<input type="checkbox"/>
Amended Information	<input checked="" type="checkbox"/>	Manifolded	<input type="checkbox"/>	No Fee	<input checked="" type="checkbox"/>

Facility ID: 8000570

Tank ID: 001

Tank Status: Currently In Use

Comments: Renewed DC  
HYDRANT - EXEMPT FROM  
REGISTRATION

Rcvd:

Alt Tank ID: 8000570\*001

**2. Date of Installation (month/year)**

**3. Estimated Total Capacity (gallons)**

Date Installed: Jun 1990

Tank Capacity: 15,000

**4. Material of Construction**

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

**5. Piping (Material)**

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Other

Comments: PRESSURIZED STAINLESS  
STEEL INNER EPOXY COATED  
STEEL OUTER.  
PIPING TYPE ALSO  
PRESSURIZED.

Sec. Piping Option: Double-Walled

**6. Piping (Type)**

Type of Pipe: Safe Suction

Check if piping has been repaired: ☐

**7. Substance Currently or Last Stored in Greatest Quantity by Volume**

Substance: Other

Comments: HYDRANT

CERCLA No.:

Description:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X. Tanks Out of Use, or Change in Service****1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used: Closure Status: Date Closure Rcvd.: Inert Fill: Date Closed: **2. Site Assessment**Site Assessment Completed: ☐Evidence of a Leak Detected: ☐**XI. Certification of Compliance****1. Installation**Installer certified by tank & piping  
manufacturer: ☐Manufacturer's installation checklists  
have been completed: ☐Installer certified or licensed by  
implementing agency: ☐Another method allowed by State  
agency: ☐Installation inspected by registered  
engineer: ☐Comments: Installation Inspected & approved by  
implementing agency: ☐**2. Release Detection**

	Tank/Pipe	
Manual tank gauging:	<input type="checkbox"/>	<input type="checkbox"/>
Tank tightness testing:	<input type="checkbox"/>	<input type="checkbox"/>
Inventory control:	<input type="checkbox"/>	<input type="checkbox"/>
Automatic tank gauging:	<input type="checkbox"/>	<input type="checkbox"/>
Vapor monitoring:	<input type="checkbox"/>	<input type="checkbox"/>
Groundwater monitoring:	<input type="checkbox"/>	<input type="checkbox"/>
SIR:	<input type="checkbox"/>	<input type="checkbox"/>
Interstit. Dbl-wall Monitor:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Interstit. Sec. Con. Monitor:	<input type="checkbox"/>	<input type="checkbox"/>

	Tank/Pipe	
Auto line leak detector:	<input type="checkbox"/>	<input type="checkbox"/>
Line tightness testing:	<input type="checkbox"/>	<input type="checkbox"/>
Other method:	<input type="checkbox"/>	<input type="checkbox"/>
Deferred:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Not listed:	<input type="checkbox"/>	<input type="checkbox"/>

Comments: SECTION 5502.1(d)  
EXEMPTED**3. Spill, Overfill, and Corrosion Protection**Overfill Protected: ☐Spill Protected: ☐CP Met on Tank & Piping: ☐**Installer Oath:**Name: Company: Position: Date Signed:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

# IX. Description of Underground Storage Tanks

## 1. Status of Tank

Federally Regulated: ☐

Compartment: ☐

AST: ☐

Amended Information: ☒

Manifolded: ☐

No Fee: ☒

Facility ID: 8000570

Tank ID: 002

Tank Status: Currently In Use

Rcvd:

Alt Tank ID: 8000570\*002

Comments:

Renewed DC  
HYDRANT TANK - EXEMPT FROM  
REGISTRATION

## 2. Date of Installation (month/year)

Date Installed: Jun 1990

## 3. Estimated Total Capacity (gallons)

Tank Capacity: 15,000

## 4. Material of Construction

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

## 5. Piping (Material)

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Other

Comments:

Sec. Piping Option: Double-Walled

PRESSURIZED STAINLESS  
STEEL INNER EPOXY COATED  
STEEL OUTER.  
PIPING TYPE ALSO  
PRESSURIZED.

## 6. Piping (Type)

Type of Pipe: Safe Suction

Check If piping has been repaired: ☐

## 7. Substance Currently or Last Stored in Greatest Quantity by Volume

Substance: Other

Comments: HYDRANT

CERCLA No.:

Description:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X. Tanks Out of Use, or Change in Service**

**1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used:

Closure Status:

Date Closure Rcvd.:

Inert Fill:

Date Closed:

**2. Site Assessment**

Site Assessment Completed: ☐

Evidence of a Leak Detected: ☐

**XI. Certification of Compliance**

**1. Installation**

Installer certified by tank & piping manufacturer: ☐

Manufacturer's Installation checklists have been completed: ☐

Installer certified or licensed by implementing agency: ☐

Another method allowed by State agency: ☐

Installation Inspected by registered engineer: ☐

Comments:

Installation Inspected & approved by implementing agency: ☐

**2. Release Detection**

Manual tank gauging: ☐

Tank tightness testing: ☐

Inventory control: ☐

Automatic tank gauging: ☐

Vapor monitoring: ☐

Groundwater monitoring: ☐

SIR: ☐

Interstit. Dbl-wall Monitor: ☒

Interstit. Sec. Con. Monitor: ☒

Tank/Pipe

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

Auto line leak detector: ☐

Line tightness testing: ☐

Other method: ☐

Deformed: ☒

Not listed: ☐

Tank/Pipe

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

Comments: SECTION 5502.1(d)  
EXEMPT

**3. Spill, Overfill, and Corrosion Protection**

Overfill Protected: ☐

Spill Protected: ☐

CP Met on Tank & Piping: ☐

**Installer Oath:**

Name:

Company:

Position:

Date Signed:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

# IX. Description of Underground Storage Tanks

## 1. Status of Tank

Federally Regulated:	<input type="checkbox"/>	Compartment:	<input type="checkbox"/>	AST:	<input checked="" type="checkbox"/>
Amended Information:	<input checked="" type="checkbox"/>	Manifolded:	<input type="checkbox"/>	No Fee:	<input checked="" type="checkbox"/>

Facility ID: 8000570

Tank ID: 003

Tank Status: Currently in Use

Comments: Renewed DC

Rcvd:

Alt Tank ID: 8000570\*003

## 2. Date of Installation (month/year)

## 3. Estimated Total Capacity (gallons)

Date Installed: Jun 1990

Tank Capacity: 550

## 4. Material of Construction

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options:

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

## 5. Piping (Material)

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Bare Steel

Comments:

Sec. Piping Option: Secondary Containment

## 6. Piping (Type)

Type of Pipe: Safe Suction

Check if piping has been repaired: ☐

## 7. Substance Currently or Last Stored in Greatest Quantity by Volume

Substance: Not Listed

Comments:

CERCLA No.:

Description:



Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X. Tanks Out of Use, or Change in Service****1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used: Closure Status: Date Closure Rcvd.: Inert Fill: Date Closed: **2. Site Assessment**Site Assessment Completed: ☐Evidence of a Leak Detected: ☐**XI. Certification of Compliance****1. Installation**Installer certified by tank & piping  
manufacturer: ☐Manufacturer's installation checklists  
have been completed: ☐Installer certified or licensed by  
implementing agency: ☐Another method allowed by State  
agency: ☐Installation inspected by registered  
engineer: ☐Comments: Installation inspected & approved by  
implementing agency: ☐**2. Release Detection**

	Tank/Pipe	
Manual tank gauging:	<input type="checkbox"/>	<input type="checkbox"/>
Tank tightness testing:	<input type="checkbox"/>	<input type="checkbox"/>
Inventory control:	<input type="checkbox"/>	<input type="checkbox"/>
Automatic tank gauging:	<input type="checkbox"/>	<input type="checkbox"/>
Vapor monitoring:	<input type="checkbox"/>	<input type="checkbox"/>
Groundwater monitoring:	<input type="checkbox"/>	<input type="checkbox"/>
SIR:	<input type="checkbox"/>	<input type="checkbox"/>
Interstit. Dbl-wall Monitor:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interstit. Sec. Con. Monitor:	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	Tank/Pipe	
Auto line leak detector:	<input type="checkbox"/>	<input type="checkbox"/>
Line tightness testing:	<input type="checkbox"/>	<input type="checkbox"/>
Other method:	<input type="checkbox"/>	<input type="checkbox"/>
Deferred:	<input type="checkbox"/>	<input type="checkbox"/>
Not listed:	<input type="checkbox"/>	<input type="checkbox"/>

Comments: **3. Spill, Overfill, and Corrosion Protection**Overfill Protected: ☐Spill Protected: ☐CP Met on Tank & Piping: ☐**Installer Oath:**Name: Company: Position: Date Signed:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

# IX. Description of Underground Storage Tanks

## 1. Status of Tank

Federally Regulated ☐

Compartment ☐

AST ☐

Amended Information ☒

Manifolded ☐

No Fee ☐

Facility ID: 8000570

Tank ID: 004

Tank Status: Permanently Out of Use

Comments:

Rcvd:

Alt Tank ID: 8000570\*004

## 2. Date of Installation (month/year)

Date Installed: Jun 1990

## 3. Estimated Total Capacity (gallons)

Tank Capacity: 10,000

## 4. Material of Construction

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Linod Interior

Check if tank has been repaired: ☐

## 5. Piping (Material)

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Fiberglass Reinforced Plastic

Comments:

Sec. Piping Option: Double-Walled

## 6. Piping (Type)

Type of Pipe: U.S. Suction

Check if piping has been repaired: ☐

## 7. Substance Currently or Last Stored in Greatest Quantity by Volume

Substance: Heating Oil

Comments: TANK EMPTY

CERCLA No.:

Description:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X. Tanks Out of Use, or Change in Service****1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used: 01 Nov 1995

Closure Status: Tank closed in place

Date Closure Rcvd.: 27 Feb 1998

Inert Fill: FLOW ASH

Date Closed: 13 Jan 1998

**2. Site Assessment**Site Assessment Completed: ☒Evidence of a Leak Detected: ☐**XI. Certification of Compliance****1. Installation**Installer certified by tank & piping manufacturer: ☐Manufacturer's Installation checklists have been completed: ☐Installer certified or licensed by implementing agency: ☐Another method allowed by State agency: ☐Installation inspected by registered engineer: ☐

Comments:

Installation inspected & approved by implementing agency: ☐**2. Release Detection**

Tank/Pipe

Manual tank gauging: ☐

Tank tightness testing: ☐

Inventory control: ☐

Automatic tank gauging: ☐

Vapor monitoring: ☐

Groundwater monitoring: ☐

SIR: ☐

Interstit. Dbl-wall Monitor: ☒

Interstit. Sec. Con. Monitor: ☒

Tank/Pipe

Auto line leak detector: ☐

Line tightness testing: ☐

Other method: ☐

Deferred: ☐

Not listed: ☐

Comments:

**3. Spill, Overfill, and Corrosion Protection**Overfill Protected: ☒Spill Protected: ☒CP Met on Tank & Piping: ☒**Installer Oath:**

Name:

Company:

Position:

Date Signed:

Facility ID: 8000570 Facility Name: NAVAL ANACOSTA - BLDG A398

**IX. Description of Underground Storage Tanks**

**1. Status of Tank**

Federally Regulated ☐

Compartment ☐

AST ☐

Amended Information: ☒

Manifolded ☐

No Reg ☒

Facility ID: 8000570

Tank ID: 005

Tank Status: Currently in Use

Comments: Renewed DC

Rcvd:

Alt Tank ID: 8000570\*005

**2. Date of Installation (month/year)**

**3. Estimated Total Capacity (gallons)**

Date Installed: Jun 1990

Tank Capacity: 8,000

**4. Material of Construction**

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

**5. Piping (Material)**

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Bare Steel

Comments:

Sec. Piping Option: Secondary Containment

**6. Piping (Type)**

Type of Pipe: Safe Suction

Check if piping has been repaired: ☐

**7. Substance Currently or Last Stored in Greatest Quantity by Volume**

Substance: Other

Comments: WASTE WATER

CERCLA No.:

Description:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X. Tanks Out of Use, or Change in Service**

**1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used:

Closure Status:

Date Closure Rcvd.:

Inert Fill:

Date Closed:

**2. Site Assessment**

Site Assessment Completed: ☐

Evidence of a Leak Detected: ☐

**XI. Certification of Compliance**

**1. Installation**

Installer certified by tank & piping manufacturer: ☐

Manufacturer's installation checklists have been completed: ☐

Installer certified or licensed by implementing agency: ☐

Another method allowed by State agency: ☐

Installation inspected by registered engineer: ☐

Comments:

Installation inspected & approved by implementing agency: ☐

**2. Release Detection**

**Tank/Pipe**

Manual tank gauging: ☐

Tank tightness testing: ☐

Inventory control: ☐

Automatic tank gauging: ☐

Vapor monitoring: ☐

Groundwater monitoring: ☐

SIR: ☐

Interstit. Dbl-wall Monitor: ☒

Interstit. Sec. Con. Monitor: ☒

**Tank/Pipe**

Auto line leak detector: ☐

Line tightness testing: ☐

Other method: ☐

Deferred: ☒

Not listed: ☐

Comments:

**3. Spill, Overfill, and Corrosion Protection**

Overfill Protected: ☒

Spill Protected: ☒

CP Met on Tank & Piping: ☐

**Installer Data:**

Name:

Company:

Position:

Date Signed:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

# IX. Description of Underground Storage Tanks

## 1. Status of Tank

Federally Regulated: ☒

Compartment: ☐

AST: ☐

Amended Information: ☒

Manifolded: ☐

No Fee: ☐

Facility ID: 8000570

Tank ID: 006

Tank Status: Currently In Use

Comments: Renewed DC

Rcvd:

Alt Tank ID: 8000570\*006

## 2. Date of Installation (month/year)

Date Installed: Jun 1990

## 3. Estimated Total Capacity (gallons)

Tank Capacity: 8,000

## 4. Material of Construction

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

## 5. Piping (Material)

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Fiberglass Reinforced Plastic

Comments: INNER STEEL

Sec. Piping Option: Double-Walled

## 6. Piping (Type)

Type of Pipe: Safe Suction

Check if piping has been repaired: ☐

## 7. Substance Currently or Last Stored in Greatest Quantity by Volume

Substance: Diesel

Comments:

CERCLA No.:

Description:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X Tanks Out of Use, or Change in Service****1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used: Closure Status: Date Closure Rcvd.: Inert Fill: Date Closed: **2. Site Assessment**Site Assessment Completed: ☐Evidence of a Leak Detected: ☐**XI. Certification of Compliance****1. Installation**Installer certified by tank & piping  
manufacturer: ☐Manufacturer's Installation checklists  
have been completed: ☐Installer certified or licensed by  
implementing agency: ☐Another method allowed by State  
agency: ☐Installation Inspected by registered  
engineer: ☐Comments: Installation Inspected & approved by  
implementing agency: ☐**2. Release Detection**

	Tank	Pipe
Manual tank gauging:	<input type="checkbox"/>	<input type="checkbox"/>
Tank tightness testing:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Inventory control:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Automatic tank gauging:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Vapor monitoring:	<input type="checkbox"/>	<input type="checkbox"/>
Groundwater monitoring:	<input type="checkbox"/>	<input type="checkbox"/>
SIR:	<input type="checkbox"/>	<input type="checkbox"/>
Interstit. Dbl-wall Monitor:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Interstit. Sec. Con. Monitor:	<input type="checkbox"/>	<input type="checkbox"/>

	Tank	Pipe
Auto line leak detector:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Line tightness testing:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other method:	<input type="checkbox"/>	<input type="checkbox"/>
Deferred:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Not listed:	<input type="checkbox"/>	<input type="checkbox"/>

Comments: SECTION 5502.3 UNTIL 2005

**3. Spill, Overfill, and Corrosion Protection**Overfill Protected: ☒Spill Protected: ☒CP Met on Tank & Piping: ☒**Installer Oath:**

Name: TODD A MONN

Company: D L GEORGE &amp; SONS CONSTRUCTI

Position: Remover

Date Signed: 12 May 1998

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

# IX. Description of Underground Storage Tanks

## 1. Status of Tank

Federally Regulated:	<input type="checkbox"/>	Compartment:	<input type="checkbox"/>	AST:	<input type="checkbox"/>
Amended Information:	<input checked="" type="checkbox"/>	Manifolded:	<input type="checkbox"/>	No. Use:	<input checked="" type="checkbox"/>

Facility ID: 8000570

Tank ID: 008

Tank Status: Currently in Use

Comments: Renewed DC

Rcvd:

Alt Tank ID: 8000570\*008

## 2. Date of Installation (month/year)

## 3. Estimated Total Capacity (gallons)

Date Installed: Jun 1990

Tank Capacity: 1,000

## 4. Material of Construction

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

## 5. Piping (Material)

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Bare Steel

Comments:

Sec. Piping Option: Secondary Containment

## 6. Piping (Type)

Type of Pipe: Safe Suction

Check if piping has been repaired: ☐

## 7. Substance Currently or Last Stored in Greatest Quantity by Volume

Substance: Other

Comments: WASTE WATER

CERCLA No.:

Description:



Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X Tanks Out of Use, or Change in Service****1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used: Closure Status: Date Closure Rcvd.: Inert Fill: Date Closed: **2. Site Assessment**Site Assessment Completed: ☐Evidence of a Leak Detected: ☐**XI Certification of Compliance****1. Installation**Installer certified by tank & piping  
manufacturer: ☐Manufacturer's Installation checklists  
have been completed: ☐Installer certified or licensed by  
implementing agency: ☐Another method allowed by State  
agency: ☐Installation inspected by registered  
engineer: ☐Comments: Installation inspected & approved by  
implementing agency: ☐**2. Release Detection**

	Tank/Pipe
Manual tank gauging:	<input type="checkbox"/>
Tank tightness testing:	<input type="checkbox"/>
Inventory control:	<input type="checkbox"/>
Automatic tank gauging:	<input type="checkbox"/>
Vapor monitoring:	<input type="checkbox"/>
Groundwater monitoring:	<input type="checkbox"/>
SIR:	<input type="checkbox"/>
Interstit. Dbl-wall Monitor:	<input checked="" type="checkbox"/>
Interstit. Sec. Con. Monitor:	<input checked="" type="checkbox"/>

	Tank/Pipe
Auto line leak detector:	<input type="checkbox"/>
Line tightness testing:	<input type="checkbox"/>
Other method:	<input type="checkbox"/>
Deferred:	<input type="checkbox"/>
Not listed:	<input type="checkbox"/>

Comments: **3. Spill, Overfill, and Corrosion Protection**Overfill Protected: ☒Spill Protected: ☒CP Met on Tank & Piping: ☐**Installer Oath:**Name: Company: Position: Date Signed:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**IX. Description of Underground Storage Tanks**

**1. Status of Tank**

Federally Regulated:	<input type="checkbox"/>	Compartment:	<input type="checkbox"/>	AST:	<input type="checkbox"/>
Amended Information:	<input checked="" type="checkbox"/>	Manifolded:	<input type="checkbox"/>	No Fee:	<input checked="" type="checkbox"/>

Facility ID: 8000570

Tank ID: 009

Tank Status: Currently in Use

Comments: Renewed DC

Rcvd:

Alt Tank ID: 8000570\*009

**2. Date of Installation (month/year)**

**3. Estimated Total Capacity (gallons)**

Date Installed: Jun 1990

Tank Capacity: 1,000

**4. Material of Construction**

Enter material of construction for the tank. You may supplement primary description with one of the Secondary Options.

Tank Material: Fiberglass Reinforced Plastic

Comments:

Sec. Tank Option: Double-Walled

Check if tank has been repaired: ☐

**5. Piping (Material)**

Enter material of construction for the piping. You may supplement primary description with one of the Secondary Option

Piping Material: Other

Comments:

Sec. Piping Option: Double-Walled

PRESSURIZED STAINLESS  
STEEL INNER EPOXY COATED  
STEEL OUTER.  
PIPING TYPE ALSO  
PRESSURIZED.

**6. Piping (Type)**

Type of Pipe: Safe Suction

Check if piping has been repaired: ☐

**7. Substance Currently or Last Stored in Greatest Quantity by Volume**

Substance: Mixture

Comments:

WATER WITH LITTLE OIL AND JP8

CERCLA No.:

Description:

Facility ID: 8000570

Facility Name: NAVAL ANACOSTIA - BLDG A398

**X. Tanks Out of Use, or Change in Service****1. Closing of Tank**

NOTE: This section not available unless tank status at top of form is set to a form of closure.

Date Last Used: Closure Status: Date Closure Rcvd.: Inert Fill: Date Closed: **2. Site Assessment**Site Assessment Completed: ☐Evidence of a Leak Detected: ☐**XI. Certification of Compliance****1. Installation**Installer certified by tank & piping  
manufacturer: ☐Manufacturer's installation checklists  
have been completed: ☐Installer certified or licensed by  
implementing agency: ☐Another method allowed by State  
agency: ☐Installation inspected by registered  
engineer: ☐Comments: Installation inspected & approved by  
implementing agency: ☐**2. Release Detection**

	Tank/Pipe
Manual tank gauging:	<input type="checkbox"/>
Tank tightness testing:	<input checked="" type="checkbox"/>
Inventory control:	<input type="checkbox"/>
Automatic tank gauging:	<input type="checkbox"/>
Vapor monitoring:	<input type="checkbox"/>
Groundwater monitoring:	<input type="checkbox"/>
SIR:	<input type="checkbox"/>
Interstit. Dbl-wall Monitor:	<input type="checkbox"/>
Interstit. Sec. Con. Monitor:	<input type="checkbox"/>

	Tank/Pipe
Auto line leak detector:	<input type="checkbox"/>
Line tightness testing:	<input type="checkbox"/>
Other method:	<input type="checkbox"/>
Deferred:	<input checked="" type="checkbox"/>
Not listed:	<input type="checkbox"/>

Comments: SECTION 5502.1(d)  
EXEMPTED**3. Spill, Overfill, and Corrosion Protection**Overfill Protected: ☐Spill Protected: ☒CP Mot on Tank & Piping: ☐**Installer Oath:**Name: Company: Position: Date Signed: